JULY 1, 2015 - JUNE 30, 2017 CONDOMINIUM ASSOCIATION BIENNIAL REGISTRATION APPLICATION

ALL INFORMATION PROVIDED IS PUBLIC INFORMATION

Public Email (optional):

FOR OFFICE USE ONLY

110.00 33.00 77.00

BIENNIAL REGISTRATION DEADLINE: Monday, June 1, 2015 (Bond exemption reapplication deadline: Thursday, April 30, 2015)

Project registration number: 4519 Name of condominium project: MANGO HILLS 2506 N SCHOOL ST HONOLULU HI 96819 Project street address (required): Expiration of bond on file with Commission: 6/27/2014 Total # units: 10 NOTE: If no information is printed in the "Expiration of bond on file with Commission" field, the AOUO has previously applied for a fidelity bond exemption (all fidelity bond exemptions expire at the conclusion of the biennial registration period). Question #5 of this application allows the AOUO to select a fidelity bond exemption. a. List the names of the officers of the association (all information provided is public information) President (required): Jeffrey Waldroop Vice President (optional): Bennett Mathias Secretary (required): Valentino Faasavalu Treasurer (required): Valentino Foasavalu Designated officer (from section 2a) for direct contact (required): Name: Jeffrey Waldroop Mailing address (public): 1559 H Meyers Street State: HI Zip: 96819.___ Day Phone: 387 - 6965 Public Email (optional):__ NOTE: Contact name of individual, public phone number and public mailing address where a unit owner and the owner's authorized agents may be able to obtain the documents, records, and information required to be provided to a unit owner and the owner's authorized agents pursuant to HRS §§ 514B-152 -154.5. Person to receive AOUO correspondence & calls from Commission (required): This Individual will receive notices to update fidelity bond coverage, as well as correspondence from the Commission. Name: Clarence Lopez Mailing Address: 1451 South King St. #409 Day Phone: 284-1612 _____ State: <u>HI ____ Zip: __96814___</u>

 Reg
 593
 \$60

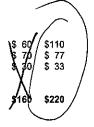
 CETF
 906
 \$ 7x10

 Mediation
 CEM
 \$ 3 x10

 Service Fee
 BCF
 \$25

 Bond Exemption
 593
 \$50

 TOTAL DUE



	authorized to serve civil process, in compliance with Hawaii Revised Statutes Chapter				634.		
		Name Primary: Clarence Lopez Title	Agent	<u> </u>	Telephone:_	284 - 1612	
		Name Alternate: Marc. Lopez. Title					
4.	Mai	Management status (required): (check ONE only and fill in c	orresponding inf	o)			
		Self-managed by Association of Unit Owners (see Instru	ictions) l	Public Email:	((Optional) .	
		Title: Name:	· · · · · · · · · · · · · · · · · · ·				
		Mailing Address:			·		
		City: State: Z	p:	Day Phone:			
	, 🛭	Managed by Condominium Managing Agent (see Instru	ctions)	Public Emai	l:	Optional)	
		Management Company: Professional Island	langgement.	L l a.	· (C	Optional)	
		Mailing Address: 1451 South King St. #409					
		City: Honoluly State: HI Z					
5.	a.	5 Et 1 (the Board (no suite of) (Batters on continue					
		No evidence of fidelity bond is attached because be Completed CSI form or certificate of insurance form OR BEFORE June 30, 2015, or evidence of current	ause bond on fil	e in Questio	n #1 expires ON		
 Bond Exemption (If applying for a bond exemption, select ONE of the following exemptions. A corresponding form on page B-2, B-3, or B-4 must be completed as part of the application process). An additional exemption application fee must be added to the preprinted total due on page A-1. 						orresponding bond dditional \$50 bond	
		 Sole Owner: Where all condominium units are ow sole Limited Liability Corporation ("LLC"), or sole Li 20 or Fewer Units: Where the condominium proje 100% Commercial Use: Where all condominium to 	mited Liability Pa ct contains 20 or	artnership ("LLP' fewer units.	poration, sol ').	e partnership,	
6. [、]	Ow	Owner occupancy: Percentage of residential use units in the	project which ar	e owner-occupie	ed: <u>105</u> %		
7.	Αnı	Annual operating budget: Did the AOUO board of directors a	idopt an annual o	operating budge	t? ⊠ Yes [☐ No	
•	ma	Pursuant to HRS § 514B-106 (c), within 30 days after adopti nake available a copy of the budget to all unit owners and s of the budget and to whom that request shall be made.	on of any propos hall notify each u	ed budget for th init owner that th	e associatio ne owner ma	n, the board shall y request a copy	
8.	Reserve studies and replacement reserves: (see Instructions)						
	For the current fiscal year, is the AOUO collecting a minimum of fifty percent of the estimated replacement reserves funding one hundred percent of the estimated replacement reserves when using a cash flow plan? ☐ Yes ☒ No						
	lf y	f yes, what is the percent funded?:%					
9.	Does your AOUO maintain and make available for owner-review during reasonable hours a reference binder containing to Board of Directors Guides, Real Estate Commission brochures, HRS Chapters 514A and 514B, HAR Chapter 107, copie of the declaration, bylaws, house rules and any amendments? ☒ Yes ☐ No						
	If y	f yes, where are the materials kept?: Professional	Esland Mana	gement, Ltd.			
10.	На	Has the AOUO amended the declaration, bylaws, condomin	ium map or other	r constituent doc	uments to a	dopt the	

11. Ha	11. Has the AOUO utilized mediation or arbitration to resolve condominium disputes within the last two years? \square Yes \boxtimes No								
lf y	es, how many times?	Mediation:	Arbitration:	RECEIVED PYC REAL ESTABLISHMAN					
12. a.	12. a. Does the AOUO have a separate email account? ☐ Yes ☒ No								
	What is the association's public email address? (optional)		ss? (optional)	16 Mia -3 A3 M7					
b.			мы эку д/						
	What is the public websi	ite address? (option	al)	Meg Town Age					

CERTIFICATION OF CONDOMINIUM ASSOCIATION OFFICER, DEVELOPER, 100% SOLE OWNER, OR MANAGING AGENT WITH DELEGATION OF DUTY TO REGISTER For the period July 1, 2015 – June 30, 2017

- 1. I have read and understand the Instructions.
- 2. I certify that this application is complete as required, and is accompanied by the required documents and fees.
- 3. I certify that I am authorized to sign this certification on behalf of this condominium association, that the information provided is true and correct, and that there are no material omissions. (It is unlawful for any AOUO, its officers, board, or agents to file with the Commission any information that is false or contains a material misstatement of fact (HRS §§ 514A-134 and 514B-99.3). Any violation is a misdemeanor.
- 4. I certify that any changes to the required information provided in questions one (1) through five (5) of the registration application information, as required by HRS § 514B-103 (a) (1), shall be reported to the Real Estate Commission, in writing, within 10 days of the date of change. I further certify that the condominium association shall continue to update all other information during the biennial registration period as required by statute and provide updated information as requested by the Real Estate Commission. Also, written notification shall be provided to the Real Estate Commission at least 30 days prior to cancellation, termination, or a material change to the information provided in the evidence of fidelity bond coverage.
- 5. I certify that this condominium association does maintain continuous fidelity bond coverage in compliance with HRS § 514B-143 (a) (3), and that evidence of fidelity bonding or bond exemption shall be filed with the Real Estate Commission throughout this entire registration period. This condominium association acknowledges that its registration shall be automatically terminated for failure to provide the Real Estate Commission with evidence of continuous fidelity bond coverage (if applicable) through June 30, 2017.
- 6. This condominium association has received sufficient notice that if it fails to submit a completed registration application and fails to maintain continuous fidelity bond coverage or an approved fidelity bond exemption, it shall not have standing to maintain any action or proceeding in the courts of this State until it properly registers (HRS § 514B-103 (b)).

Signature of Association Officer, Developer 100% Sole Owner, or Managing Agent (Original signature or stamp preferred, however facsimile or photocopied signatures are accepted)

Clarence T. Lapez, Jr.

Print Name

G/30/16

Date

AOAO Manago Hills

Print Name of Condominium Association (Managing Agent include CMA Name)

CHECK ONE ONLY:[] President [] Vice-President [] Secretary [] Treasurer [] Developer or Developer's Agent registering for unorganized association [] 100% Sole Owner of Condominium Project [] Managing Agent with Delegation of Duty to Register

Mail or deliver all fees & documents to: Real Estate Branch, AOUO Registration, 335 Merchant St., Rm. 333, Honolulu, HI 96813

If you need assistance: call (808) 586-2643 to speak to a condominium registration clerk.

This material can be made available for individuals with special needs. Please call the Senior Condominium Specialist at (808) 586-2643 to submit your request.